CC TO A NOMITTAL

## 5616535333

T-752 P.03/15 F-007

APR 0 4 2006

Approved for use through 07/31/2008. OMB 0651-0032

U.S. Petent and Trademark Office; U.S. DEPARTMENT OF COMMERCE

Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it glaplays a valid OMB control number.

Complete if Known

LEE IVANOMILIA	Application No			Numbe	<sub>er</sub> 16	0/623,949					
for FY 2004	Filing Date			JL	July 21, 2003						
Effective 10/01/2003. Pagent fees are subject to annual revision.			First Named Inventor			Killinger et al.					
			Examiner Name			Talbot, Michael					
Applicant claims small entity status, See 37 CFR 1.27	Art Unit			3	3722						
TOTAL AMOUNT OF PAYMENT (\$) 1,020.00		Attorney Docket No. 38			o. 38	3827.116					
METHOD OF PAYMENT (cneck all that apply)	FEE CALCULATION (continued)										
Check Credit card Money Other None	3. ADDITIONAL FEES Large Entity , Small Entity										
✓ Deposit Account:	Fee	Fee		Fee		Can Docarle	nei o a				
Deposit Account 50-0951	Code	(\$)	Code	(\$)		Fee Description Fee					
Numbor	1051	130	2051			ge - late filing fo se - late provisio					
Account Name	1052	50	2052		cover sh						
The Director is authorized to. (check an that apply)	1053 1812	130 2,520	1053 1812 2			plish specificano e recuest for e	N x <i>parte</i> reexamination				
Charge (se(s) indicated below Credit any overpayments	1804	920	1804	• • • •	-	ing publication of	•				
Charge any auditional fee(s) or any underpayment of fee(s)				1	Examine	r action		<del>                                     </del>			
Charge fee(s) indicated below, except for the filling fee to the above-identified deposit account.	1805	1,840*	1805 1	5,840°	Examina	ing publication : er action	or SIR after	<u> </u>			
FEE CALCULATION	1251	770	2251			on for reply with					
1. BASIC FILING FEE	1252	420	2252	-,-			in secona month	1,020.00			
Large Entity Small Entity	1253	950	2253			on for reply with					
Fre Fee Fee Fee Description Fee Paid Code (3) Code (5)		1,480	2254			on for reply with					
1001 770 2001 385 Utility filing fee		2,010	_	•		on for reply with	in titth month				
1002 340 2002 170 Design filing fee	1401	330	2401			of Appeal	-f				
1003 530 2003 265 Plant filing fee	1402	330 290	2402 2403		-	orief in support : for oral heanng	, .				
1004 770   2004 385   Reissue filing fee		7,510			•		blic use proceeding				
SUBTOTAL (1) (\$) 0.00	1452	110	2452			to revive - unav	·				
	1453	1,330	2453	665	Petition	10 revive - unint	entional				
2. EXTRA CLAIM FEES FOR UTILITY AND REISSUE	1501	1,330	2501	665	Ublity is:	sue feu (or reiss	iue)				
Extra Claims befow Fee Paid Total Claims 20** = x = = = = = =	1502	480	2502		_	ssue fee		<u> </u>			
Independent	1503	640 130	2503 1460		Plant is:	sue ree s to the Commi:					
Claims Multiple Dependent	1460	50	1807			sing fee under 3					
Large Entity   Small Entity	1806	180	1806			_	on Disclosure Stmt				
Foo For Fee Fee Description Code (\$) Code (\$)	8021	40	8021	40	Records	ng each patent (	assignment per				
1202 18 2202 9 Claims in excess of 20	1809	770	2809		property	(times number submission afte	of properties)	1			
1201 86 2201 43 independent claims in excess of 3	1005	,,,	2009		(37 CFF	(a))	( http://paday				
1203 290 2203 345 Multiple dependent claim, if not paid	1810	770	2810	385	For each	h additional inve ed (37 CFR 1.12	ention to be				
1204 86 2204 43 "Reissue independent daims over onginal patent	1801	770	2801			•	Examination (RCE)				
1205 18 2205 9 Reisaue claims in excess of 20 and over ongunal patent	1802	900	1802	900	Reques	st for expedited	examination				
		fee (sp									
SUBTOTAL (2) (\$) 0.00 *Reduced by Basic Filing Fee Paid SUBTOTAL (3) (\$) 1,020.00								0.00			
SUBMITTED,BY (Complete (# appikaore))											
Name (PnnuType) Stephan A Pendorf		Registra Attorney		32,6	665	Teleph	ane 561.653.5000				
Signature Date April 4, 2005											
			*****		<del> </del>						

WARNING: Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038.

This collection of information is required by 37 CFR 1.67 and 1.27. The information is required to obtain or retain a boricfit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Tredemark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandra, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO This ADDRESS.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-PTO-9199 and select option 2.

## RECEIVED **CENTRAL FAX CENTER**

APR 0 4 2006

Fort Lauderdale Jacksonville Miamı New York Orlando Tallahassee Титпя Washington, DC West Palm Beach



T-752 P.01

Esperante Building 222 Lakeview Avenue, Suite 400 West Palm Beach, Florida 33401-6183

Post Office Box 3188 mail West Palm Beach, Florida 33402-3188

www.akerman.com

561 653 5000 sel 561 659 6313 fax

FAX COVER SHEET

From: Stephan A. Pendort'

Date: April 3, 2006

PLEASE DELIVER PAGE(S) (including cover sheet) TO:

FROM-AKERMAN SENTERFITT

Name:

Company:

U.S.P.T.O.

Fax Number:

571.273.8300

Phone Number:

Please call 561,653,5000, Ext. 33635 if you do not receive all the pages.

## Comments/Special Instructions

Re: Amendment A.

> U.S. Patent Application No. 10/623,949 TOOL HEAD WITH AT LEAST TWO INDEXABLE CUTTING INSERTS

Art Unit: 3722

Examiner: Talbot, Michael Our Docket No.: 3827.116

The information contained in this transmission may be a confidential attorney-client communication or may otherwise be privileged and confidential, intended only for the use of the individual or entity named above. If the reader of this transmittal is not the intended recipient or the employee or agent responsible to deliver it to the intended recipient, you are hereby notified that any dissemination, distribution or copying of this communication is strictly prohibited. If you have received this communication in error, please immediately notify us by telephone and return the original transmittal to us by mail. Thank you.

Client/Matter No: 186361

Equitrac ID: 7096

{WP297229,1}

APR 0 4 2006

	•	4FK U 4 ZUUU	Ann	round for use	a rhenu	PTO/SB/21 (02-04) gh 07/31/2006. OMB 0651-0031				
U.9 Patent and Tracemark Office: U.S. DEPARTMENT OF COMMERCE  Under the Paperwork Reduction Act of 1995, no persons are required to respond to a collection of information unless it displays a valid QMB control number.										
STATE THE PARTY HAVE THE PARTY OF THE PARTY	THE SOUTH	Application Number	10/623,949							
TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Filing Date July 21, 2003								
		First Named Inventor	med inventor Killinger et al.							
		Art Unit	3722							
		Examiner Name	iner Name Tailor, Michael							
T The Com-		Attorney Docket Number 3827,116								
Total Number of Pages in This Submission										
ENCLOSURES (Check all that apply)										
Fee Transmittal Form  Fee Attached  Amendment/Reply  After Final  Affidavits/declaration(s)  Extension of Time Request  Express Abandonment Request  Information Disclosure Statement  Certified Copy of Priority Document(s)  Response to Missing Parts/ Incomplete Application  Response to Missing Parts Under 37 CFR 1.52 or 1,53	F F F F F F F F F F F F F F F F F F F	Prawing(s)  Accessing-related Papers  Petition Petition to Convert to a Provisional Application Power of Attorney, Revocation Change of Correspondence Addre Ferminal Disclaimer Request for Refund  CD, Number of CD(s)  ks  ation is given to charge any neces	0	to Tec Appear of App Appear (Appear Propri Status Other Identii	chnoke al Corpeals Corpeal Corpeals Cor	osure(s) (please ow) spońdence Address				
SIGNAT	URE O	F APPLICANT, ATTORNI	Y, OR	AGENT	<del></del>					
Akeman Senterfit/Stephan A Pendorf Reg. No. 32,665 or Individual name  Signature  Date  CERTIFICATE OF TRANSMISSION/MAILING  I hereby certify that this correspondence is being facsimile transmitted to the USPTO or deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450 on the date shown below.										
Typed or printed name Stepptan A. Pendorf Reg. No. 32,656										
Signature	-13	77			Date	April 4, 2006				

This collection of information is required by \$7 CFR 1.5. The information is required to obtain or retain a benefit by the public writin is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to 2 nours to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form sinclor suggestions for reducing this burden, should be sent to the Chief information Officer, U.S. Patent and Trademark Officer, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 7-800-PTO-9199 and select option 2.